

Reply to Attn. of CACFP-432

JUN 0 7 1995

Subject Eligibility of Proprietary Title XX Centers to Participate in the Child and Adult Care Food Program (CACFP)

To:STATE AGENCY DIRECTORS
(Child Nutrition Programs)

Colorado DH, Iowa, Kansas, Missouri DH,
 Montana DHES, Nebraska ED, North Dakota,
 South Dakota, Utah and Wyoming

Attached for your information and action is a copy of a recent memorandum from the National Office which clarifies and changes procedures related to forprofit centers participating in the CACFP which serve Title XX children. The second paragraph of this May 9, 1995 memorandum refers to a previous memorandum that was issued in 1991. For your easy reference, we have attached a copy of our CACFP-235 dated April 10, 1991.

As you will note, the policy communicated in this new memorandum will have an effect on these centers' participation. In order to assist you, we contacted the Regional Health and Human Service (HHS) Offices to elicit basic information on the status of Title XX being used to support individual child care services. We were advised that Colorado, Iowa, Kansas, Missouri, Nebraska, and Utah currently use Title XX funds for child care; Montana, North Dakota, South Dakota, and Wyoming do not. In addition, we were also advised that in states that do use Title XX funds for child care, the amount of funds can be minimal and may be used to support child care for a limited or specified group of children, such as only for foster care children. Therefore, it is imperative that you coordinate with the appropriate Agency in your state to determine your individual circumstances. To assist you, we are attaching a list of State Child Care Coordinators that our Regional HHS Offices provided to us. We bring special attention to the last paragraph on page 2 of the May 9 memorandum which addresses compliance dates for this change in policy.

If there are any questions, please contact our staff at (303) 844-0359.

ANN C. DEGROAT
Regional Director

Child Nutrition Programs

Attachments

CN-124

Eligibility of Proprietary Title XX Centers to Participate in the Child and Adult Care Food Program (CACFP)

Regional Directors Special Nutrition Programs All Regions

Title XX of the Social Security Act, as amended, authorizes the Social Services Block Grant (SSBG) program. Under that program, grants are made to the States and other eligible jurisdictions for use in funding a variety of social services directed towards the needs of individuals and families. Child care is one of the most frequently provided services. For the purposes of this memorandum, the terms Title XX and SSBG are used interchangeably.

Section 17(a) of the National School Lunch Act (NSLA), as amended, allows a proprietary organization to participate in the CACFP if it provides nonresidential day care services for which it receives compensation from Title XX of the Social Security Act for at least 25 percent of its enrolled children or 25 percent of its licensed capacity, whichever is less. On April 3, 1991, Child Nutrition Division issued a policy memorandum to clarify the eligibility of proprietary Title XX centers to participate in the CACFP. One of the issues addressed was the extent to which it is necessary for a proprietary center to show that Title XX funds are being received on behalf of an individual child when such funds are provided through a State or local funding pool. We have recently become aware of a change to Department of Health and Human Services (DHHS) statute and regulations governing Title XX which requires a change to our 1991 memorandum.

Under our 1991 memorandum, we stated "...that as long as Title XX funds are going into a State or local funding pool from which child care services are purchased, and money from this pool is going to a center on behalf of an individual child, those funds may be considered to be Title XX funds...It is not necessary for the center to be able to trace the money directly to Title XX." Our position was based upon the premise that funds provided to a proprietary center for day care services through State and local funding pools were difficult if not impossible to identify by funding source.

On November 15, 1993, the DHHS issued a final rule (58 FR 60117) to implement the reporting requirements specified in the Family Support Act of 1988. Under the provisions of §96.74, each State agency receiving funds under the SSBG must identify the number of

children "...who receive services paid for in whole or in part with federal funds under the Social Services Block Grant, showing separately the number of children...who received such services...[and] the amount of Social Services Block Grant funds spent in providing each service, showing separately for each service the average amount spent per child recipient..." This language makes it clear that data on the number of SSBG (i.e., Title XX) recipients exists, or will be available, at the State agency which administers the SSBG. As State agencies which administer the SSBG establish procedures to meet the requirements of the November, 1993 rulemaking, the impediments to identifying individual children on whose behalf Title XX funds are received will be greatly lessened.

Please urge the State agencies which administer CACFP to contact their SSBG counterpart to explain our statutory requirements and to request that, as SSBG procedures are established, provision is made to accommodate the data needs of proprietary centers wishing to participate in the CACFP. Since the implementation schedule for the November, 1993 rulemaking varies by SSBG State agency, such contacts should be initiated as soon as possible. Depending upon the SSBG State agency's data collection system, this may entail simple accounting code changes which are used to apprise the proprietary center of the funding source for individual children or it may necessitate more complex procedures.

As State agencies enter into these collaborative discussions on behalf of the proprietary centers in their State, please reiterate that, by statute, any proprietary center wishing to participate in CACFP, must receive Title XX compensation for at least 25 percent of its enrolled children or 25 percent of its licensed capacity, whichever is less. The child on whose behalf pooled funds are provided must be a Title XX recipient in order to be included in the center's Title XX calculation. (A Title XX recipient is a child who receives services paid for in whole or in part with Federal funds under the SSBG.) To facilitate these collaborative discussions, we have provided a copy of the November, 1993 rulemaking issued by DHHS.

Because of the need to coordinate with State agencies which administer SSBG, we are giving State agencies which administer CACFP and currently participating centers until December 31, 1995, to document the actual percentage of Title XX children in their centers. However, effective immediately, no new center may be approved under the Title XX provisions of the regulations unless it can document the actual percentage of Title XX children in the center.

Regional Directors

Please inform your States immediately of the above change in policy to allow for full implementation by the December 31, 1995 deadline. If you have any questions regarding the above, please contact Bob Eadie or Ed Morawetz at (703) 305-2590.

ALBERTA C. FROST

Director

Child Nutrition Program

Attachment

11-15-93 Vol. 58

No. 218



Monday November 15, 1993

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Office of the Secretary

45 CFR Part 96 **RIN 0970-AB06**

Social Services Block Grant Program; **New Reporting Requirements**

AGENCY: Administration for children and Families, HHS. ACTION: Final rule.

SUMMARY: The Department is issuing this final rule to implement new annual reporting requirements for the Social Services Block Grant program. Also, as required by statute, we are publishing uniform definitions of services which states must use in submitting certain information required in their annual reports.

DATES: The effective date of this regulation is December 15, 1993. However, the reporting requirements in the statute became effective upon their enhancement on October 13, 1988.

FOR FURTHER INFORMATION CONTACT: Bryant Tudor (202) 401-5535 or Frank Burns (202) 401-5536, Administration for Children and Families. Office of Community Services, Fourth Floor-East Wing, 370 L'Enfant Promenade. SW., Washington, DC 20447.

SUPPLEMENTARY INFORMATION:

I. Program Description

The Omnibus Budget Reconciliation Act of 1981 (Pub. L. 97-35) amended title XX of the Social Security Act (the Act), 42 U.S.C. 1397, to establish the Social Services Block Grant (SSBG) program. Under this program, grants are made to the 50 states, the District of Columbia, and other eligible jurisdictions (Puerto Rico, Guam, the Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands) for use in funding a variety of social services directed towards the needs of individuals and families residing within each state.

Social services are directed at five goals in the Social Services Block Grant statute to: Prevent, reduce or eliminate dependency; achieve or maintain selfsufficiency; prevent neglect, abuse or exploitation of children and adults: prevent or reduce inappropriate care; and secure admission or referral for institutional care when other forms of care are not appropriate.

In fiscal year 1991, \$2.8 billion was allotted to states based on the statutory formula. Within the specific limitations in the law (42 U.S.C. 1397d), each state has the flexibility to determine what services will be provided, who is eligible to receive services, and how funds are distributed among the various services within the state. State or local SSBG agencies may provide these services directly or purchase them from other public or private agencies and/or individuals.

II. New Statutory Requirements

Prior to the enactment of the Family Support Act of 1988, section 2006 of the Social Security Act (42 U.S.C. 1397e) required each state to report biennially on activities carried out under the SSBG. The report was required to include an accurate description of such activities, a complete record of the purposes for which funds were spent. and the extent to which funds were spent consistent with the state's preexpenditure report required by section 2004 (42 U.S.C. 1397c).

Section 607 of the Family Support Act of 1988. Public Law 100-485, amended section 2006 to require that reports be submitted annually rather than biennially. In addition, a new subsection 2006(c) was added to require that the following specific information be submitted as a part of each state's

annuai report:

(1) The number of individuals who received services paid for in whole or in part with funds made available under this title, showing separately the number of children and the number of adults who received such services, and broken down in each case to reflect the types of services and circumstances involved:

(2) The amount spent in providing each type of service, showing separately for each type of service the amount spent per child recipient and the amount spent per adult recipieat:

(3) The criteria applied in determining eligibility for services (such as income eligibility guidelines, sliding fee scales, the effect of public assistance benefits, and any requirements for enrollment in school or training programsi:

(4) The methods by which services were provided, showing separately the services provided by public agencies and those provided by private agencies. and broken down in each case to reflect the types of services and circumstances involved.

Section 2006(c) also directs the Secretary to establish uniform definitions of services for use by the states in preparing the above information and "to make such other provision as may be necessary to assure that compliance with these requirements will not be unduly burdensome on the States."

III. Background

The SSBG was enacted in fiscal year 1981 to replace the previous title XX program that had been in effect since 1975. Reporting requirements implementing the prior title XX program included the Social Services Reporting

Requirements (SSRR)—a system of quarterly and annual reports from states of unduplicated counts of recipients, by service, by eligibility category, by expenditure of funds, by method of provision, and by title XX goal, as well as special reports on child day care.

When the SSBG was enacted, the Department decided not to go beyond the language of the statute in implementing the biennial reporting requirements. However, beginning in 1983, the Office of Human Development Services, the office which previously administered the SSBG, funded the American Public Welfare Association to operate a Voluntary Cooperative Information System to collect data on state SSBG services, expenditures and numbers of individuals served. States have supported the concept of a voluntary information collection system, but not all states have participated or submitted complete data on their use of SSBG funds.

IV. Notice of Proposed Rulemaking

On April 5, 1990, the Department published a Notice of Proposed Rulemaking (NPRM) to implement the new reporting requirements enacted in the Family Support Act of 1988 (55 FR

The proposed rule contained, but did not go beyond, the reporting requirements contained in the statute. The NPRM also proposed uniform definitions of 26 services that states would be required to use in preparing the information required by section 2006(c), and a one-page reporting form for the numerical data required by section 2006(c).

We received comments from 32 state agencies in 29 states, two local service provider organizations, and three national organizations, including one national organization representing state SSBG agencies. In addition, we met with representatives of state SSBG agencies responsible for complying with the new reporting requirements.

V. Summary of Changes in the Final

In developing the final rule, the Department maintained its commitment to the principles stated in the NPRM:

1. All requirements or procedures were evaluated to assure that compliance with and implementation of the requirement would not be unduly burdensome on the states.

The uniform service definitions the Department developed did not affect state flexibility in the selection of the services a state chose to provide, in the state definition of these services, or in the state's use of its SSBG funds.

 No additional federal funds are being requested for state implementation of the new statutory requirements.

4. While no monetary penalties are assessed for noncompliance, a state would be subject to an audit finding for failure to submit an annual report containing the information specified in section 2006 of the Act.

In general, the majority of the comments supported the Department's proposed approach and the specific provisions of the NPRM. However, after full consideration of all of the comments, we have made the following changes or retained the following

provisions:

(1) We have amended § 96.74(a)(3) to add a requirement that states report a total amount of federal, state and local funds for each service. The language of the law is clear in requiring reports of the number of persons served in whole or in part with SSBG funds: the law is not explicit about whether SSBG funds or total social services funding should be reported. We received many comments pointing out that SSBG funding in many states represents only a fraction of the total state expenditures for most services. Many comments suggested that average costs, limited to SSEG funds, per adult recipient and child recipient would be meaningless. This additional information will provide a context for understanding the recipient and expenditure figures reported by states.

(2) Section 96.74(b)(3) continues to require states to report actual numbers of recipients and actual expenditures when this information is available, but allows states to use data based on sampling and/or estimates when actual

figures are unavailable.

(3) The determination, stated in the NPRM, that no federal purpose would be served by requiring states to report an unduplicated count of recipients has been retained in the final rule. Many states commented that unduplicated counts would be unduly burdensome and would require costly systems. development to implement.

(4) We have attempted to increase the reliability and uniformity of data by clarifying how states should count recipients of services to determine the total number of recipients of each service. Section 96.74(b)(3) directs states to consider a service provided to a recipient for the length of the reporting period (one year) or any fraction thereof as a single service.

(5) Section 96.74(b)(3) also directs states to count only a single recipient for each service. We have suggested that the states consider the recipient to be the

individual who alrectly interacts with the service provider. We have made this change in response to questions about which individuals states should count when services are delivered on behalf of families.

- (6) Section 96.17(a)(2) clarifies that states may use either the federal or the state fiscal year as the reporting period for the annual report.
- (7) We have accepted almost all of the specific editorial and technical comments we received regarding changes in the Uniform Definitions of Services. The definitions remain descriptive and broadly inclusive, with illustrative examples of component services and activities.
- (8) We have added two new services definitions in the Uniform Definitions of Services. Employment Services are now defined as a discrete service category; they formerly had been considered a component of Employment, Education and Training Services. A new services definition, independent and Transitional Living Services, has also been added.
- (9) To permit greater specificity in reporting expenditure data, we have revised § 96.74(b)(4), and the reporting form, to add several sub-categories to item 30, non-service expenditures. This section now requires reporting of funds transferred to or from the SSBG, balances carried over by a state from the previous fiscal year, balances carried forward to the next fiscal year, and other administrative costs and activities.
- (10) We have deleted the requirement in § 96.74(b)(4) that the total in the Expenditure column of the reporting form tservices plus other expenditures; must equal the state's allotment for that fiscal year.

VI. Summary of Comments and the Departmental Response

We appreciate the thoughtful comments and recommendations and, in some cases, detailed analysis we received on the NPRM. All written comments were analyzed and form the basis for changes we have made in these final rules. The discussion which follows includes a summary of the major comments, our responses to those comments, and the changes that baye been made in the final rule as a result of the comments.

1. General Comments

Most states and organizations were supportive of the approach taken in the NPRM, especially of the Department's efforts to implement the new statutory requirements with minimum burden on the states.

Comments:

 The regulations accomplish the dual task of obtaining information on the uses of Social Services Block Grant funds and minimizing the burden placed on states. They accomplish the goal of adequate accountability without the regirection of an undue amount of resources from service provision to administrative activity.

However, several comments objected to the implementation of any additional requirements under the SSBG.

Comments:

- We recognize that the new reporting requirements are imposed by statute.
 Even so, we believe that they are inherently inconsistent with the block grant concept, which was implemented with the understanding that reporting requirements would be minimized.
- When the SSBG was implemented states were granted flexibility and were relieved of many burdensome requirements in exchange for block grant funding. We are now still under block grant funding but are returning the onerous reporting requirements of pre-block grant years.

Department's response:
No changes are required by these comments.

2. SSBG Funds Only Part of the Total State Social Service Program

A serious concern affecting the consistency, reliability and interpretation of the data raised by several states is that, in most states. services are only partially funded with SSBG funds. This means that, as proposed in the NPRM, states would report the number of people served in whole or part with SSBG funds but report on services expenditures based on SSBG dollars alone. This could lead to erroneous conclusions about the costs of services because average expenditures would be understated. Generally, states seemed to recognize a need for accountability, but wanted the data they report to be accurate and useful.

Comments:

- Since SSBG funds might pay a portion of the total cost of a service.
 reports of average costs per service recipient will be incomplete and virtually meaningless.
- It is recommended that more consideration be given to providing guidance to states which will minimize the potential for greatly overstating the numbers of recipients of SSBG funded services. One method, of course, is that if SSBG funds 5 percent of a service, then 5 percent of the recipients would

be reported. Without some specific guidance to states the data on per recipient costs will almost certainly contain very large variations and will have very little value to planners or policy makers.

• As an example, in FY 1990, the state projects \$208 million in social services expenditures, but the state's SSBG allotment is \$129.3 million. If Congress is interested in the social services delivered to needy citizens, it would be necessary to report as we do now the entire picture of services that fall within SSBG.

 The proposed requirement describes services which are funded in whole or in part by SSBG. In many cases, in our state. SSBG funds only a fractional portion of the total service provided and, as a result, this will not be reflected accurately in the total cost per client figure.

• The expenditures per child and the expenditures per adult may be very misleading because the SSBG funds cover only a portion of the actual services cost.

Department's response:

After much consideration, we agreed that a change was needed and have added a new requirement in § 96.74(a)(3). For each of the service categories, states should report (or estimate, or determine the amount through sampling) the amount of federal, state and local funds that

support the service. We recognize that there is wide variation among states in their use of and coordination with other sources of funding for social services programs. Some states include within their services programs only SSBG and state funds, while others include funds from other federal programs, e.g., the Community Services Block Grant, the Job Opportunities and Basic Skills (JOBS) program. Child Welfare Services. the Older Americans Act. and Medicaid. as well as state and local funding. We are requesting that the states provide. as part of their annual report, a listing of the programs and amounts of funding which constitute their overall services programs. We have made a corresponding change in the reporting form (see appendix B).

3. Estimation and Sampling of Data

Out of concern for the accuracy and reliability of data, one comment suggested that estimation and sampling not be allowed under the final rule.

Comment:

 In the rules, it is proposed that if accurate data was not available then sampling or estimating would be

stiowed. Even a smart amount of ampling or estimating may invalidate the data or raise questions about the reliability of the information. It has been the experience of this agency that when estimations are used, the budgeting process becomes questionable in the eves of the public or lawmakers.

However, most of the comments endorsed the use of estimation and campling as a way of relieving undue burdens on state data collection efforts. and, in some cases, as the only way such information could become readily available.

Comments:

 Major systems development, at great cost to this state, would be necessary if 'actual' statistics were required. We ask that the option of providing 'estimates' be sustained in the final regulation.

 SSBG dollars are widely spread over salaries and services and may be mixed with other funds. It is therefore difficult to collect data that represent discrete SSBG services. In some programs, we will have to rely heavily on estimated data.

 Our ability to meet the new requirements is dependent on retaining the assurance that estimates can be reported when actual recipient or expenditure data is not available.

 In the past, the block grant client counts and expenditures have been estimated, based on the assumption that all clients of Departments of Social Services and Human Service Departments in target groups other than Developmental Disability, Mental Health and Alcohol or other Drug Abuse are funded by SSBG funds. We could continue to use this estimation method.

Department's response:

We continue to be favorably .mpressed with the sense of responsibility displayed by state agencies in their desire that the information collected be as accurate as possible. While we agree that actual counts of recipients and expenditure data provide more reliable information. we are charged by law to minimize the burden on states, and believe that such a requirement would be too burdensome. Therefore, we have made no changes in this section of the rule as proposed. Section 96.74(b)(3) requires that states use sampling and estimation techniques only where actual figures are unavailable: that data be identified as actual figures, or figures based on sampling or estimation; and that the sampling and/or estimation process(es) be described. We believe that the availability of this information is sufficient to inform researchers and

policymakers of the limitations of the data. The reporting form has been revised to indicate whether data are actual, estimated or based on sampling.

4. Duplicated Counts of Services Recipients

In the preamble to the notice of proposed rulemaking, we noted that "no federal purpose would be served by requiring states to report an unduplicated count of recipients." We are aware that only a few states have the capability of producing an unduplicated count. The comments we received reflect this.

Two states suggested that unduplicated counts be required.

Comments:

 The NPRM states that "no federal purpose would be served by requiring states to report an unduplicated count of recipients." In discussions this position was restated by federal representatives. We are convinced that if states provide duplicated counts, then information on costs per recipient will have little meaning. Since the amount of duplication would be unknown either within an individual state's report or from state to state, little use could be made of the information.

 The biggest problem we see here is the counting of clients. If states are allowed to provide duplicated counts of clients, the data become almost meaningless. We recommend that states be asked to provide an unduplicated count of clients within each Service Category. States which cannot provide an unduplicated count should be allowed to estimate. "Not Available" is more meaningful than a duplicated number

Most states, however, favor the position taken in the NPRM.

Comments:

 Given the current variability in states' SSBG data collection capabilities. the reports of individuals receiving services will range from carefully screened unduplicated counts to grossly duplicated totals.

 Although the Federal Register background section states that "no federal purpose would be served by requiring states to report an unduplicated count of recipients," we believe they probably mean across service categories. The public law itself uses the term "individual" in reference to the count of service recipients. Unless the rule can allow that clients not be unduplicated within each service as well as across services, we will have problems reporting. The only method to prevent duplication, even within

services, is to have a statewide automated system based on a single client identifier. We have a number of service areas not using our Client Information System (CIS) (e.g., prevention, homemaker/housekeeper) or where our most valid, reliable data come from a source other than CIS (e.g., emergency shelter, foster care).

 True unduplicated counts both within and across services cannot be provided at present. In most cases, client data and expenditures are derived separately. Combining the two databases will always result in estimation of perclient expenditures, particularly where unduplicated client data are not available.

 A question arises with reference to the statement under the NPRM Background section that "no federal purpose would be served by requiring states to report an unduplicated count of recipients." We initially assumed that this meant that there was no requirement for a state to report an unduplicated count for the entire aggregate population of recipients for all services funded in whole or in part with SSBG funding, and that data on individuals served per service category would need to be reported as an unduplicated count. However, from information provided at a recent workshop, we understand that duplicated counts per service category are to be permitted. We recommend that this information be set forth in the final

finalized SSBG reporting form. This state, except for a limited number of counties, is unable at this time to provide an unduplicated count. Therefore, the total column on the example form in appendix B would be a duplicated count. The expenditure total would be an accurate count.

rule and/or the instructions for the

 Our ability to meet the new requirements is dependent on retaining the policy criterion that there will be no requirement that states report an unduplicated count of recipients within or among uniform service categories.

Department's response:

We continue to believe that these new requirements of law should be implemented without placing undue burdens on states. Because many states are unable to produce an unduplicated count of recipients without major changes in their data collection procedures, or without setting up a new data collection system at considerable cost, we are not making changes in this section of the regulation. However, states are required, under § 96.74(b)(3), to provide actual numbers of recipients when this information is available, and to identify and describe estimation and/

or sampling procedures when these procedures are used. We have also changed § 96.74(b)(3) to require that duplicated counts be identified. Similar changes have been made in the reporting form and instructions in appendix B.

5. Data Collection Issues

A number of comments related to basic reporting issues concerned the methods states should use to count the recipients of social services,

Comments:

- Lack of consistency in reporting would result in misleading information. For example, a child in foster care for 12 months could be counted 12 times if counted each month, four times if counted quarterly, and once if counted annually. Additionally, if the same child receives other services such as transportation, is he to also be counted for transportation as well as foster care? What should take precedence?
- It is not clear as to what constitutes a client being served. For example, would a client who received homemaker services once a week for ten weeks be considered as "one" client or would the service be reported as "ten" since it had been provided ten times to the client?

Department's response: We have clarified in § 96.74(b)(3) that states should consider a service provided for the annual reporting period—or any fraction thereof—to be a single service provided to a single recipient. For example, a child in foster care, who received a foster care service funded in whole or part under the SSBG for tweive months, should be counted as one child receiving one service. If a child was in foster care for three months, returned home for three months, and returned to foster care for six months, that child should also, if possible, be counted as one child receiving one service. We believe this change will contribute to the consistency, accuracy and reliability of

A related issue concerns the difficulty in determining the individual to whom services are provided, especially in cases where the services are designed to benefit a family.

Comments:

 The proposed rules do not state whether reported services should be associated with a single client or whether a service should be associated with all family members who benefit from it. For example, counseling to a parent which serves to protect a child could be reported as having been

provided to both. Child day care provided to allow a parent to receive employment training could be similarly reported.

- For uniformity, simplicity, and consistency in data reporting, we recommend that the requisite recipient data for certain service categories be limited to one type of recipient only. Thus, for Foster Care for Children, the appropriate recipient number would be restricted to the count of foster children, or that number of individuals deemed to be in foster care placement, state custody, and/or under foster care casework supervision, and the state's definition of child for this category would include those individuals remaining in foster care placement after reaching the age of majority.
- The definition of "children/adults" is left to the discretion of the states. Our current data base captures services to specific target populations, such as adolescents, adults, children, and families. However, certain services are not provided exclusively to "children" or "adults," but to "families." Thus, we recommend that an attempt be made to ciarify how services to "families" are to be reported, since we believe this has both philosophical, as well as practical implications for our clients.

Department's response:

In § 96.74(b)(3), we have clarified how states should count recipients. i.e., one recipient per service. We suggest, but do not mandate, that the individual who interacts directly with the provider of services should be considered the recipient of services. Therefore, a child would be considered the recipient of child day care services, even if those services are provided primarily to enable a parent to receive employment or training. Similarly, an adult receiving counseling services would be considered the services recipient, even if those services are provided, in part, for the protection of a child. However, within a family, several family members could each be receiving different services, or the same service, and be counted separately. For example, if each member of a family is receiving counseling, each family member should be counted separately.

While we appreciate that states are increasingly focusing on providing services to families, and support this philosophically, the statute requires states to report data by adults and by

In a related comment, one state asked about different definitions for "adult" and "child" under different services.

Comment:

 A similar issue is the adult and child distinction. Each state will using their own definition of "a and "child." and will include th. definition in their annual report. Within this state, the definitions of "adult" and "child" will differ by service category and by eligibility.

Department's response:

Since this does not conflict with the statute, it is an area where state discretion should take precedence. There is no requirement that each state's definition of "adult" and "child" remain consistent for every service.

Comment:

 One national organization suggested that each state be required to report on services delivered to children and to various categories of adults by age. The suggestion was four categories: Children (birth to 17); young adults (18-39); midlife adults (40-59); and older adults (60+).

Department's response:

Because it was our intent to not go beyond the requirements of the statute. to minimize reporting burdens, and to preserve state flexibility where possible, we are not accepting this suggestion.

6. Reporting Period

One state suggested that the reperiod be the same for all states.

Comment:

· We recommend that all states be required to use the federal fiscal year when reporting SSBG expenditures. Very little is consistent from state to state: a uniform reporting period would facilitate comparability and timely compilation of data. Since estimation is ... allowed, state fiscal year adjustment should be feasible and not unduly burdensome.

However, other states commenting on the language in § 96.17(a)(2) expressed concern that the regulations should . accommodate a reporting period that gives the states the flexibility to use the same program year they use for planning purposes.

Comments:

 A major concern of this state relates to language in the proposed rule which implies that the annual report would require service information to be reported according to the federal fiscal year of funds allotment rather than the state fiscal year of funds expenditure. Our fiscal and programmatic data related to SSBG funded services is presently maintained according to period of budget expenditure by st... fiscal year (july 1 through June 30).

Tracking SSBG funded services by federai fiscai year would entail implementing special data collection systems.

 The state completes its report for the period covered by the state fiscal vear which runs july 1 through June 30. It is our interpretation that the report will be due six months after the end of the state mical year, which would be December 31, or subsequently when the state submits its application for the federal fiscal year, which would be by june 30 of the following year.

Department's response:

It was our intention in the proposed rule to minimize reporting burdens on states. The program year used by each state is the appropriate period for that state to use in reporting, as these generally coincide with state planning. budget and legislative cycles. We have modified the language in § 96.17(a)(2) to clarify that either the state or federal fiscal year may be used.

7. Effective Date

Several states expressed concern about the timing of the implementation of the new reporting requirements.

Comments:

 We would require a six-month lead time for intra-agency coordination and the implementation of methodological change.

 We would recommend at least a two-year phase-in of the requirements. in order to give states enough time to make the needed system changes. programmatic changes, and reporting changes to enable us to comply with the new federal statute.

 States need adequate time to establish a system to obtain the requested information and train staff. We support establishing an implementation date at least six months from the approval date of the

 The state will require a minimum of six months to one year lead time from the promulgation of the final regulations in order to make the system changes to comply with the reporting requirements and disseminate these requirements to the county departments of human services and service providers.

 There is a possibility that some of the requirements, as well as the services definitions might change in the final rule. State data collection should not be required until after the final regulations

are published.

Department's response:

These regulations implement requirements of law that have been in effect since the enactment of the Family Support Act of 1988 (Public Law 100-

485) on October 13, 1988. The Department provided each state agency administering the SSBG with a copy of the new statutory requirements in an Information Memorandum (HDS-IM-89-1) issued February 2, 1989. A Program instruction (HDS-PI-89-14), issued November 24, 1989, required states to submit annual reports based on the new requirements. The NPRM was published on April 5, 1990.

The Program instruction directed states to prepare annual reports, and gave states the option to base those reports on state definitions of services. and the recipient and expenditure data available. This report could be submitted in any format of the state's choice, although a number of states have been using the reporting form which appeared in the NPRM. States are reminded that this requirement for an annual report remains in effect.

Because these reporting requirements are minimal, have been in effect for more than four years, and because the Department has not imposed requirements that would be unduly burdensome, states must submit an annual report which meets the requirements of this final rule, using the specified reporting form, beginning with the state or federal fiscal year following the year in which the final rule is published. That report must be submitted within six months of the end of the period covered by the report, or at the time the state submits its application for funding for the fiscal year which begins at the expiration of that six-month period, as stated in § 96.17(a). Each state is encouraged to begin using the reporting form and uniform services definitions immediately.

The Department will be collecting. analyzing and publishing these data as a resource for Congress, the states. researchers and others beginning with the fiscal year in which this regulation is published.

8. Non-Service Expenditures

Several states commented about reporting non-service expenditures. with one state suggesting that specific additional information be reported.

Comment:

- We would suggest the addition of cells to the reporting form for the following entries:
 - 1. Monies transferred into SSBG
 - Monies transferred out of SSBG. Monies carried over from the
- previous fiscal year. 4. Monies representing certified match.

Department's response:

The SSBG statute gives states the flexibility to transfer funds among certain block grants. States also have two years to expend SSBG funds. To reflect this, we have revised § 96.74(b)(4) to require states to report. under category 30-non-services expenditures-suo-categories for transfers from or to the SSBG, carry over balances (i.e., the amount of funds reserved from the previous fiscal year), and carry forward balances (i.e., the amount the state intends to expend in the following fiscal year). Also, recognizing that state expenditures need not equal the state's allotment each year. we have removed the requirement in § 96.74(b)(4) that the total in the expenditure column of the reporting form must equal the state's allotment for that fiscal year. Since state matching is not required under the SSBG, we did not accept the recommendation that we add a sub-category to show "certified match." The amount of such funds or other local of donated funds will be reported in the new category of services funding as state or local funds (see § 96.74(a)(3).

9. Services Definitions: General

A few states misunderstood the NPRM to require the use of the uniform services definitions in the design of their state programs. In addition, many states expressed concern about the reliability of data because of the variation among state service programs and the amount of overlap among the services definitions.

Comments:

 Policy criterion number 2, "The uniform service definitions the Department is required to issue will not affect state flexibility in the selection of the services a state chooses to provide. in the state definition of these services. or in the state's use of SSBG funds." appears to negate the intent of the reporting requirements.

 The Uniform Definition of Services appears to be the first transformation of the block grant into a specific grant system. State discretion is restricted and the federal government is put in the position of determining the state's needs, rather than relying on the judgment of the state and its local

entities. Because the service categories have been defined broadly (and even overlap) to encompass different service delivery patterns, there will be great variation from state to state in the services reported within each category.

 Given the flexibility in reporting afforded to states by the new rules, the resulting information will be of limited anaiytical value. It would seem desirable to establish consistency in reporting by the states so that the information can be interpreted similarly for all states and in aggregate.

 We applaud your efforts to standardize reporting practices and appreciate the diversity of data collection and reporting practices among the states. In general, we believe that there is considerable overlap in the definitions of the 26 services, and that the overiap may complicate their interpretation and limit the confidence which can be placed in aggregate data.

 Definitions, as given, are in many areas inconsistent and open to interpretation by the reporting person. For example, case management—which occurs in multiple service areas-could be reported as case management rather than a more specific service area. As a result, uniform/consistent reporting would not be achieved.

Department's response:

First, we agree that, given our approach to allow as much flexibility as possible, consistency of data among states will not be easily achieved. However, we believe that the overall purpose of these data is to serve as general indicators of trends in stateadministered social services programs. rather than as definitive reports. We do not, for example, intend that the data would be subject to rigorous analysis. evaluation efforts, or to the same standard of verification that would apply to a fiscal audit. We believe this approach will provide useful data without the need to divert funds for social services into expensive systems development at the state level.

Second, the uniform service definitions in the NPRM represented the Department's effort to produce a framework, for reporting purposes only. that would encompass most of the activities currently described and funded by states under the SSBG. We want to emphasize that the uniform services definitions are not meant to direct how states define or deliver services; all of the flexibility under the block grant statute is retained. We do not expect the uniform services definitions to be identical to those used in any state. However, we do believe they offer a reasonable framework for reporting. States are asked to review their own services and if at all possible use the uniform services definitions for services which correspond. If this is not possible, states can use the "other services" category.

The Department has made minor editorial and technical changes in specific definitions, and added two new services delinitions, as described below.

10. Changes in Services Definitions

We specifically raised three reporting issues in the NPRM—asking for recommendations of services that may have madvertently been omitted; whether case management, counseiing and transportation should be reported discretely or as components of other services; and whether the definition or home based services was appropriate.

New Services Definitions:

 A comment from a national organization representing 37 state SSBG agencies suggested adding a definition for "Independent and Transitional Living Services." These are services designed to help older youth in foster care or homeless youth make the transition to independent living, or to help adults make the transition from an institution, or from homelessness, to independent living.

Department's response: We have accepted this suggestion and added a new definition.

Comment

 Another comment suggested that we examine the definition of "Employment, Education and Training Services," and break out employment as a separate servica.

Department's response:

Based on this comment, and on a growing pattern by states of providing education and training services that are not necessarily related to employment. we have developed separate definitions for "Education and Training Services" and "Employment Services."

Comment:

 Another comment suggested that we add "money management/protective payee" as a new services definition.

Department's response:

We agree that this is an important activity which some states may provide. typically as a part of another service. Under the uniform definitions, states could report this activity as a component of case management, adult protective services or adult foster care: they could also report as a separate service under "other services," item 29. However, we have not defined this activity as a separate service because no state currently includes this as a separate service in their pre-expenditure

b. Case Management, Counseling and Transportation

We invited comment on the issue of whether case management, counseling and transportation should be reported as separate services or included only as

components of the service Most states commented that degree of flexibility was nece. this area.

Comments:

 We agree with the recommendat. that states should have the option to report counseling, case management and transportation as separate services. The state provides these services for the most part as separate services, although they may also be provided as components of other services. We would prefer to be unable to report them in either category.

 Although consistency in reporting procedures should be a goal of the new requirements, we agree that states should not be required to separately report the number of services recipients and the costs of counseling, case management and transportation when these services are component parts of

other services.

Several states, however, expressed concern that the reporting requirement constituted an "either/or" situation.

 We agree with the proposal to allow reporting separately or within other services. However, it is not clear whether a state is expected to do all one or the other. We suggest the requirements specifically allow state mix methods as appropriate. An example might be transportation. If t state has a contract which can be accessed by multiple services, it would be reported under the category of transportation: but if they also have another service, it would be reported within that service.

 in our present service program structure transportation is considered a subordinate and integral activity (and not a separate service program area) for our direct delivered child protection and child welfare program services. However, in our purchase of services programs, transportation services are treated as a separate and distinct service category. We have historically annotated the SSBG reporting to indicate this qualification and would recommend that such a practice could still be allowed and would not be anomalous under the new reporting requirements.

Department's response: We have accepted the comments that request maximum state flexibility. We emphasize that states need not choose between methods of reporting. Case management, counseling and transportation (and other services) may be reported as discrete services or as components of other services. State that offer these services both discre

and as components of other services may report poin ways.

c. Home Based Services

We also invited comment on the definition of home based services. At issue was whether home health services. should be reported as part of home based services or separately, as we proposed. Another issue was whether the component activities we had included under the definition of home based services—including homemaker services, chore services, and home management services-should be reported separately. One state recommended that home health services be reported as a component of home based services. However most of the comments we received agreed with the NPRM.

Comments:

- The state will be able to separately report nome health services under Health Related Services. However, we see no need to separately report the components of home based services.
- Home health services should not be reported under the definition "Home Based Services." as home health services by their definition require trained health care providers to provide services and should be tracked under the definition "Health Related and Home Health Services." Home based services by definition are services provided, in general, by untrained providers (i.e., homemakers, etc.) and therefore should be reported under the definition "home based services."
- For the purposes of program monitoring and planning, the state tracks the services collectively listed by the proposed rules under "home based services" separately. Various in-home services may be provided as part of a service plan related to protection, disability or other reason. There should be no need to break out the separate services, however, under "home based services" unless this is done for all service categories.

Department response:

Based on the comments we have decided to retain the approach we proposed—that is, home health services should be reported under the category "Health Related Services," or under "other services," category 29, and such other activities as homemaker services, chore services, home management services and home maintenance services, should be reported under the category "Home Based Services."

Comment:

 A related comment suggested that the prevention of abuse of adults be added to the definition of home based services.

Department's response: We agree and have changed the phrase "to prevent child abuse and neglect" to "to prevent the abuse or

neglect of a child or adult."
d. Day Care Services

Comment:

 One comment suggested that "plan development" be included as a component activity in the definition of both child and adult day care.

Department's response:

We have accepted this suggestion.
Another comment mentioned the
difficulty in defining the term
"recipient" in relation to activities that
are incidental to the provision of a
service.

Comment:

 Child care licensing is currently defined as a program expenditure in the State. It will be very difficult to develop a reliable estimate of "service recipients" for this activity.

Department's response:

The final regulation retains state flexibility to report such administrative activities either as part of a service (where that activity is covered in the uniform service description in appendix A, as is the case here), or as an "other expenditure" on the reporting form, i.e., an administrative cost. This is an issue for other services as well-recruitment and home certification are included as possible activities in adoption and foster care services, for example. We suggest that if such administrative activities are a part of the state's definition of the service, no recipient count should be attempted. Alternatively, if a state wishes to report day care licensing as an "other service" and indicate the number of individuals, agencies or organizations with which the state has worked, the state should do so, adding an explanation of the data elsewhere in the annual report.

e. Special Services for Persons With Disabilities

Comments:

 We received several comments suggesting a change in the title of the service definition "Special Services for the Developmentally Disabled, the Blind, and the Physically Disabled."

Department's response:

In response, we have changed the title of this definition to "Special Services for Persons with Developmental or

Physical Disabilities, or Persons with Visual or Auditory Impairments." We also added language to show that such services may be provided to "maximize the potential of persons with disabilities," and added family support, transportation, respite care and recreation as possible component activities.

f. Prevention and Intervention Services Comment:

 One comment suggested that prevention and intervention services should more explicitly include preventing the removal of a child or adult from the home.

Department's response:

A statement to that effect now appears in the definition.

Comments:

 Several comments questioned the need for two services—prevention and intervention services and protective services—that appear similar in content.
 Other comments asked how such activities as family violence services or child abuse investigation could be reported.

Department's response:

We agree that there is some overlan between the services definitions. because they describe similar activities. In general, we have defined the services categories broadly so that states may choose the category which is closest to their own service definition. As noted in the NPRM, we tried to develop definitions that are descriptive and inclusive rather than detailed and limiting, Many states offer the component activities described under one definition or the other, and a significant number of states (12) offer both "protective" and "preventive" or "intervention" services for adults or children.

We have therefore decided to retain both services in the uniform services definition. In addition, we have added the term "family violence services" to both definitions. Similarly, child abuse investigations may be reported under either category.

Comment:

 Another comment suggested that the service definition of "prevention and intervention" place greater emphasis on prevention, and note that alternate placements or living arrangements are a possible consequence of abuse or neglect.

Department's response:

We have accepted this comment, but have retained language to show that activities designed to ameliorate the

consequences of abuse or neglect may also be reported under this definition.

g. Residential Treatment Services

• We received several comments regarding residential treatment services appearing both as a separate services definition, and as a component activity of other services, including: Special services for persons with developmental or physical disabilities, or persons with visual or auditory impairments; special services for youth involved in or at risk of involvement in criminal activities; and substance abuse services. One comment suggested that we delete the definition for residential treatment services because of this overlap.

Department's response: Section 2005 of the SSBG statute limits the use of SSBG funding for residential treatment services. Section 2005(a)(3) prohibits the use of SSBG funds for payment of room and board except for the cost of subsistence during rehabilitation, temporary shelter provided as a protective service, or room and board provided for a short term as an integral but subordinate part of a social service. Similarly, section 2005(a)(4) prohibits the use of SSBG funding for the provision of medicare care, other than family planning services, rehabilitation services, or initial detoxification of an alcoholic or drug dependent individual, unless it is an integral but subordinate part of a social service. Section 2005(a)(5) prohibits federal funding for social services provided to individuals in hospitais, skilled nursing facilities, or prisons except services provided to an sicoholic or drug dependent individual. or rehabilitation services.

Each state defines services within these statutory restrictions. Residential treatment services are intensive, often short-term, and relatively expensive. As a result, many states maintain separate recordkeeping for residential treatment as a separate service, even when it is provided as an integral but supordinate part of another social service. e.g., short term residential care of an emotionally disturbed child. For this reason we have decided to maintain residential treatment services as a separate services definition, while maintaining the flexibility for states which separately define residential treatment as a component of another service to report under a different category.

h. Case Management Services Comment:

 One comment focused on case management services, directing our attention to the definition of case management services under the Medicaid program, which allows payment for case management services, but prohibits duplicate payment when case management is funded under another program. This comment pointed out that, with the limited availability of funding for services, one funding source should not jeopardize the delivery of services through another funding source.

Department's Response:

We agree that similar or identical services may be provided through various federal programs and our purpose is not to jeopardize funding. We believe this is a matter of cost allocation at the state level to avoid duplicate claims for the same service to the same client. The phrase "duplicative payment" does not prohibit a state from using SSBG funds for case management of social services and Medical funds for case management of medical services.

i. Foster Care Services

Comment:

 One state suggested that the service definitions be coordinated with the Foster Care. Adoption and Child Welfare programs under titles IV-B and IV-E of the Social Security Act. to assure that the definitions would not jeopardize funding under those titles.

Department's response:

There is no definition of foster care services, only of foster care (i.e., maintenance payments) under these titles. However, in response to the comment, we have included in the definition of foster care services all of the allowable settings for foster care under titles IV-B and IV-E.

Comment:

 Regarding coordination with title IV—E. another comment asked why activities may be defined as services under the SSBG but as administrative costs under title IV—E.

Department's response:

The title IV-E statute provides that activities other than maintenance costs, e.g., case management, which support the provision of foster care may be reimbursed as administrative costs. It is the state's choice whether to provide such activities, for children who are eligible under titles IV-B or IV-E, as administrative expenses under those programs, or as services under the SSBG.

11. Eligibility Criteria and Sliding Fee Scales

The statute requires states to report the criteria applied in determining eligibility for each service. In this regard one state inquired about the use of sliding fee scales as a criterion for eligibility.

Comment:

• Section 94.74(a)(4) states that, among other possible criteria applied in determining eligibility for each service, information on sliding fee scales must be included. The state uses or allows sliding fee scales in a small number of service categories. However, client eligibility is not affected by client payment or non-payment of the fee, therefore, our interpretation of the proposed regulation is that the state does not have fee scales which are a criterion for determining client eligibility.

Department's response:

We understand that payment of the fee, in this case, is not a criterion for receipt of the service. However, in this and in all instances where sliding fee scales are used to determine eligibility, the state should report that information. The SSBG statute, in section 2006(c)(3) is clear that states must report:

"the criteria applied in determining eligibility for services (such as income eligibility guidelines, siiding fee scales, the effect of public assistance benefits, and any requirements for enrollment in school or training programs)."

We believe such data are of interes the citizens of the state as well as to t Department. Congress and others. We also believe such data, in many instances, are readily available, e.g., as part of the state's pre-expenditure report, or in state agency reports to the Governor or to the legislature, or easy to estimate.

Comment:

Another comment inquired about the specific information required under § 96.74(a)(4):

For example, in many states
eligibility guidelines vary from service
to service and provider to provider. Are
states required to submit income
eligibility guidelines or sliding fee
scales for every service and provider or
a sample or guidelines or fee scales used
within the state?

Department's response:

The statute requires states to submit information about "the criteria applied in determining eligibility for each service." If eligibility differs by services, or by providers, the state should describe all the eligibility requirements for each service.

12. Definition of "Public" and "Private" Means of Service Provision

The statute requires states to report the methods by which each service is

provided, showing separately the services provided by public agencies, private agencies, or both. One state mentioned that the distinction between "direct delivered" and "purchased" services is not always the same as the distinction between "public" and "private" means of service provision:

 A potential difficulty for adapting to the proposed rule could be encountered in how the terms "public" and "private" are defined as distinct methods of service provision. The state's SSBG plan makes a distinction in delivery method between "direct delivered" and "purchased" services. Included among our purchase of services contractors are community action agencies which are subdivisions of local public governing bodies. A strict interpretation of the "private" method of service provision might exclude provision by entities affiliated with local public governing bodies.

Department's response:

Given the language in section 2006(c)(4) of the law that requires states to report "the methods by which services were provided, showing separately the services provided by public agencies and those provided by private agencies," we are not making a change in the regulation. We understand that some states may need to identify which "purchased services" are obtained from public agencies and which from private agencies in order to respond to this requirement. For those service categories where services are provided both by public agencies and also by private organizations (either non-profit or for-profit), the state should simply indicate both methods of service provision on the reporting form.

13. Services Provided by Indian Tribes

One national organization recommended reporting in relation to Indian tribes.

Comment:

 We believe that it is important for the reporting requirements to mandate that states separately report the amount of money distributed to Indian kibes and the services provided by those tribes.

Department's response: We are reluctant go beyond the statute and have, therefore, decided not to accept this suggestion. States may, if they wish, include specific information about services provided by Indian tribes as part of their annual report. Four states currently report this information.

14. Reporting Race and Ethnic Background

One state suggested reporting racial and ethnic data.

Comment:

 Since services provided under the Social Services Block Grant must comply with the Civil Rights Act, it would seem prudent to collect data on the racial and ethnic characteristics of the population being served.

Department's response:

Similarly, because we are reluctant to impose burdens beyond what the law requires, we have not accepted this suggestion, although states may include such information in their annual reports.

15. Coordination With Other Reporting Systems

Comment

 Several states specifically mentioned other reporting systems that are being or will be implemented in the near future, especially the Adoption and Foster Care Analysis and Reporting System (AFCARS), and the summary data component of the National Child Abuse and Neglect Data System (NCANDS).

Department's response:

We have coordinated our efforts with officials responsible for those systems and have been assured that the Uniform Definitions of Services in appendix A are compatible with the provision of federally-funded adoption, foster care and child welfare services under titles IV—B and IV—E of the Social Security Act and the Child Abuse Prevention and Treatment Act.

However, AFCARS and NCANDS are different from the reports required by this final regulation. We expect the proposed AFCARS system to require detailed information about individual cases. The recently-implemented summary data component of NCANDS is a voluntary system that asks states to compile relatively detailed aggregate data about reports of child abuse and neglect: a second component of NCANDS, the detailed case data component, will be phased in during 1993 and 1994 and will ask states to maintain and report individual case data.

This regulation, by contrast, does not require the development of an extensive data collection system. Rather, it requires only annual aggregate information about statewide expenditures and relies, in many cases, on data that is either readily available to states, or easy to estimate.

16. No Additional Funds Requested

Several states commented that additional funding would be required to implement these requirements.

Comments:

 We request a reconsideration of the decision to provide no new federal support for systems development or enhancements mandated by stronger federal reporting requirements.

• Like other states, we are attempting to update and integrate our information systems and comply with new federal reporting mandates with limited resources. Any effort to make the reporting requirements more comprehensive would require additional federal funding.

 Little thought appears to have been given to costs involved in implementing the new reporting requirements. The title XX Social Services reporting systems in place prior to 1982 were not maintained. To implement a new reporting system will require substantial funds.

• Our state will need to implement a major change to its data base to capture the required new information. Further, many of the small non-profit agencies which contract with the Department for these needed social services do not have the sophisticated electronic equipment or the staff to implement them. This will require a costly Department investment in equipment revision and update, as well as technical assistance and training for our provider agencies, if it is to be successful.

 Initiation and maintenance of a new system will be costly at all levels of administration, when demands for direct services are continuing to grow.

 The proposed data collection will have a significant impact on the state.
 There will be a need to modify our current data collection mechanisms.
 The biggest cost will be to the agencies

who have to supply the data.

• States are now operating on reduced staffs and budgets. Some may be partially computerized, while others have not had the money to enter into the electronic data processing arena. The additional reporting requirements will impose requirements that are a throwback to the pre-SSBG era. The information requested was gathered by the state prior to 1981, using the estimation process, and dropped after the implementation of the SSBG.

Department's response:

We do not believe these new reporting requirements will necessitate the kind of extensive systems development some of the comments envision. The extensive and rigorous data that were

required under the former Social Services Reporting Requirements (SSRR) are not required here. Based on our informal discussions with states, we believe the flexibility afforded the states by permitting estimation and sampling also should prevent the need for extensive systems development.

We also believe that much of the information required is already gathered hy many states for their pre- and postexpenditure reports, or for their own planning, budgetary and legislative purposes. For example, data on estimated numbers of recipients and expenditures may also be available from purchasing or contracting offices. without requiring additional reporting from sub-grantees. For these reasons. along with budgetary constraints at the federal level, we maintain our previous position not to request additional funding for the implementation of these requirements.

17. Federal Central Office Administration

One state inquired about the administration of the new requirements.

· We recommend that there be one designated contact person to provide clarification and interpretation to the states regarding the uniform definitions and reporting instructions, rather than various Regional Office staff having responsibility for such clearances.

Department's response:

Final rules for these new reporting requirements were being prepared during the time the Department was being reorganized. As part of this repreanization, which created the Administration for Children and Families (ACF), it was determined that the SSBG will be administered by the Office of Community Services within ACF, which also has responsibility for two other block grant programs. The headquarters office was also given responsibility for all matters concerning the administration of the SSBG program. Therefore, all pre-expenditures and annual reports should be submitted directly to the headquarters office of the Administration for Children and Families, to the attention of the contact person(s) listed above.

18. Audits

One state raised the question of the relationship between these reporting requirements and audits.

Comment:

· Will the auditors under the Single Audit Act need to verify the report? If an ineligible client was found in an

audit would the proportionate share of her SSBG funding be disallowed?

Department's response:

Pecause the new requirements allow estimation and sampling where actual figures are unavailable, the data should not be subject to the same standard that applies to a fiscal audit. We would expect auditors to review the state's annual report, just as they would review other documents pertaining to the program. An auditor may recommend a disallowance during the course of an audit but the annual report would not be the basis.

Failure by a state to submit an annual report would be the basis for an audit exception.

VII. Impact Analysis

Executive Order 12291

Executive Order 12291 requires that a regulatory analysis be prepared for major rules, which are defined to include any rule that has an annual effect on the economy of \$100 million or more, or certain other specified effects. The proposed regulatory changes would add new requirements to pre-existing state reporting duties and are thus unlikely to have an effect on the economy of \$100 million, or any of the other effects specified in the Executive Order. Therefore, the Secretary concludes that this regulation is not a major rule under Executive Order 12291 and a regulatory impact analysis is not required.

Regulatory Flexibility Act of 1980

The Regulatory Flexibility Act (5 U.S.C., Ch. 6) requires the federal government to anticipate and reduce the impact of rules and paperwork requirements on small businesses. For each rule with a "significant economic impact on a substantial number of small entities," an analysis must be prepared describing the rule's impact on small entities. Small entities are defined in the Act to include small businesses, small non-profit organizations, and small governmental entities. This regulation. if promulgated, will affect only state governments. For this reason, the Secretary certifies that these rules will not have a significant impact on a substantial number of small entities.

Paperwork Reduction Act

Public reporting burden for the collection of information requirements in 45 CFR 96.74 is estimated to average 5.906 hours per response.

This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and

completing and reviewing the collection of information.

These information collection requirements are subject to review by the Office of Management and Budget (OMB) under section 3504(h) of the Paperwork Reduction Act of 1980 (Pub. L. 96-511). A notice will be published in the Federal Register when OMB approves the information collection requirements.

List of Subjects in 45 CFR Part 96

Administrative practice and procedure. Aged, Alcoholism, Child welfare, Community action programs. Drug abuse. Energy, Grant programsenergy, Grant programs-health, Grant programs-Indians, Grant programssocial programs. Health, Indians, investigations. Low and moderate income housing, Maternal and child health. Mental health program. Public health. Reporting and recordkeeping requirements. Social Security.

(Catalog of Federal Domestic Assistance Number 93.667. Social Services Block Grant)

Dated: July 1, 1993.

Laurence |. Love.

Acting Assistant Secretary for Children and Families.

Approved: August 30, 1993.

Donna E. Shalais.

Secretory.

For the reasons set forth in the preamble, part 96 of title 45 of the Code of Federal Regulations is amended as follows:

1. The authority citation for part 96 of title 45 is revised to read as follows:

Authority: 42 U.S.C. 300w et seq.; 42 U.S.C. 300x et seq.: 42 U.S.C. 300v et seq.: 42 U.S.C. 701 et seq.: 42 U.S.C. 8621 et seq.: 42 U.S.C. 9901 et seq.; 42 U.S.C. 1397 et seq.; 31 U.S.C. 1243 note.

2. Section 96.1 is amended by revising paragraph (f) to read as follows:

§ 95.1 Scope.

(f) Social Services (Pub. L. 97-35, sections 2351-55, 42 U.S.C. 1397-1397(e)) as amended.

•

3. Section 96.17 is revised to read as follows:

§ 96.17 Annual reporting requirements.

- (a) Except for the low-income home energy assistance program activity reports, a state must make public and submit to the Department each annual report required by statute:
- (1) Within six months of the end of the period covered by the report; or
- (2) At the time the state submits its application for funding for the federal or

state fiscal year, as appropriate, which begins subsequent to the expiration of that six-month period.

- (b) These reports are required annually for preventive health and health services (42 U.S.C. 300w-5(a)(1)). community mental health services (42) U.S.C. 300x et. seq.), the prevention and treatment of substance abuse block grant (42 U.S.C. 300x-21 et. seq.), maternai and child health services (42 U.S.C. 706(a)(1)), and the social services block grant (42 U.S.C. 1397e(a)). See § 96.82 for requirements governing the submission of activity reports for the low-income home energy assistance program.
- 4. A new § 96.74 is added to read as follows:

§ 96.74 Annual reporting requirements.

(a) Annual report. In accordance with 42 U.S.C. 1397e. each state must submit an annual report to the Secretary by the due dates specified in § 96.17 of this part. The annual report must cover the most recently completed fiscal year and. except for the data in paragraphs (a) (1) through (4) of this section, may be submitted in the format of the state's choice. The annual report must address the requirements in section 2006(a) of the Act, include the specific data required by section 2006(c), and include other information as follows:

(1) The number of individuals who receive services paid for in whole or in part with federal funds under the Social Services Block Grant, showing separately the number of children and the number of adults who received such services (section 2006(c)(1));

(2) The amount of Social Services Block Grant runds spent in providing each service, showing separately for each service the average amount spent per child recipient and per adult recipient (section 2006(c)(2)):

(3) The total amount of federal, state and local funds spent in providing each service, including Social Services Block Grant funds:

(4) The method(s) by which each service is provided, showing separately the services provided by public agencies, private agencies, or both (section 2006(c)(4)); and

(5) The criteria applied in determining eligibility for each service such as income eligibility guidelines. sliding fee scales, the effect of public assistance benefits, and any requirements for enrollment in school or training programs (section 2006(c)(3)).

(b) Reporting requirement. (1) Each state must use the uniform definitions of services in appendix A of this part, categories 1-28, in submitting the data required in paragraph (a) of this section.

Where a state cannot use the uniform definitions, it should report the data under category 29, "Other Services." The state's definitions of each of the services listed in category 29 must be included in the annual report.

(2) Each state must use the reporting form issued by the Department to report the data required in paragraphs (a) (1) through (4) of this section.

(3) In reporting recipient and expenditure data, each state must report actual numbers of recipients and actual expenditures when this information is available. For purposes of this report. each state should, if possible, count only a single recipient for each service. States should also consider a service provided to a recipient for the length of the reporting period (one year) or any fraction thereof as a single service. Data based on sampling and/or estimates will be accepted when actual figures are unavailable. Each state must indicate for each service whether the data are based on actual figures, sampling, or estimates and must describe the sampling and/or estimation process(es) it used to obtain these data in the annual report. Each state must also indicate, in reporting recipient data, whether the data reflects an unduplicated count of recipients.

(4) Each state must use category 30. "Other Expenditures." to report nonservice expenditures. Only total dollar amounts in this category are required. i.e., they need not be reported by recipient count or cost per adult/child. This will include carry over balances. carry forward balances, funds transferred to or from the SSBG program, and administrative costs as defined by the state.

(5) Each state must use its own definition of the terms "child" and "adult" in reporting the data required in paragraphs (a) (1) through (5) of this section.

(6) Each state's definition of "child" and "adult" must be reported as a part of the eligibility criteria for each service required in paragraph (a)(5) of this section. The data on eligibility criteria may be submitted in whatever format the state chooses as a part of its annual

(c) Transfer of computer data. In addition to making the annual report available to the public and to the Department, a state may submit the information specified in paragraphs (a) (1) through (4) of this section using electronic equipment. A full description of procedures for electronic transmission of data, and of the availability of computer diskettes, is included in Appendix B to this part.

5. Appendices A and B are added to part 96 🕳 follows:

Appendix A to Part 96-Uniform Definitions of Services

- 1. Adoption Services
- 2. Case Management Services
- 3. Congregate Meais
- 4. Counseling Services
- 5. Day Care Services—Adults
- 6. Day Care Services-Children
- ... Education and Training Services
- a. Employment Services
- 9. Family Planning Services
- 10. Foster Care Services for Adults
- 11. Foster Care Services for Children
- 12. Health Related and Home Health Services
- 13. Home Based Services
- 14. Home Delivered Meals
- 15. Housing Services
- 16. Independent and Transitional Living Services
- 17. Information and Referral Services
- 18. Legal Services
- 19. Pregnancy and Parenting Services for Young Parents
- 20. Prevention and Intervention Services
- 21. Protective Services for Adults
- 22. Protective Services for Children
- 23. Recreational Services
- 24. Residential Treatment Services
- 25. Special Services for Persons with Developmental or Physical Disabilities. or Persons with Visual or Auditory Impeirments
- 26. Special Services for Youth Involved in or At Risk of Involvement in Criminal
- 27. Substance Abuse Services
- 28. Transportation Services
- 29. Other Services

Uniform Definitions of Services

1. Adoption Services

Adoption services are those services or activities provided to assist in bringing about the adoption of a child. Component services and activities may include, but are not limited to, counseiing the biological parent(s), recruitment of adoptive homes, and pre- and post-placement training and/or counseling

2. Case Management Services

Case management services are services or activities for the arrangement, coordination, and monitoring of services to meet the needs of individuals and families. Component services and activities may include individual service plan development: counseling: monitoring, developing, securing, and coordinating services; monitoring and evaluating client progress: and assuring that clients' rights are protected.

3. Congregate Meals

Congregate meals are those services or activities designed to prepare and serve one or more meals a day to individuals in central dining areas in order to prevent institutionalization, malnutrition, and feelings of isolation. Component services or activities may include the cost of personnel. equipment, and food: assessment of nutritional and dietary needs; nutritional education and counseling; socialization; and other-services such as transportation and information and referral.

4. Counseling Services

Counseting services are those services or activities that apply therapeutic processes to personal, family, situational, or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances. Problem areas may include family and marital relationships, parent-child problems, or drug abuse.

5. Day Care Services-Adults

Day care services for adults are those services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Component services or activities may include opportunity for social interaction, companionship and self-education; health support or assistance in obtaining health services; counseling; recreation and general leisure time activities; meals; personal care services; plan development; and transportation.

6. Day Care Services—Children

Day care services for children (including infants, pre-schoolers, and school age children) are services or activities provided in a setting that meets applicable standards of state and local law, in a center or in a home, for a portion of a 24-hour day. Component services or activities may include a comprehensive and coordinated set of appropriate developmental activities for children, recreation, meals and snacks, transportation, health support services, social service counseiing for parents, plan development, and licensing and monitoring of child care homes and facilities.

7. Education and Training Services

Education and training services are those services provided to improve knowledge or daily living skills and to enhance cultural opportunities. Services may include instruction or training in, but are not limited to, such issues as consumer education, health education, community protection and salety education, literacy education. English as a second language, and General Educational Development (G.E.D.). Component services or activities may include screening, assessment and testing; individual or group instruction: tutoring: provision of books, supplies and instructional material; counseling; mansportation; and referral to community resources.

E. Employment Services

Employment services are these services or activities provided to assist individuals in securing employment or acquiring or learning skills that promote opportunities for employment. Component services or activities may include employment screening, assessment, or testing; structured job skills and job seeking skills; specialized therapy (occupational, speech, physical); special training and tutoring, including literacy training and pre-vocational training; provision of books, supplies and instructional material; counseling, transportation; and referral to community resources.

9. Family Planning Services

Family planning services are those educational, comprehensive medical or social services or activities which enable individuals, including minors, to determine freely the number and specing of their children and to select the means by which this may be achieved. These services and activities include a broad range of acceptable and effective methods and services to limit or enhance fertility, including contraceptive methods (including natural family planning and abstinence), and the management of infertility (including referral to adoption). Specific component services and activities may include preconceptional counseling. education, and general reproductive health care, including diagnosis and treatment of infections which threaten reproductive capability. Family planning services do not include pregnancy care (including obstetric or prenatal care).

10. Foster Care Services for Adults

Foster care services for adults are those services or activities that assess the need and arrange for the substitute care and alternate living situation of adults in a setting suitable to the individual's needs. Individuals may need such services because of social. physical or mental disabilities, or as a consequence of abuse or neglect. Care may be provided in a community-based setting, or such services may arrange for institutionalization when neces Component services or activities include assessment of the individual's needs: case planning and case management to assure that the individual receives proper care in the placement; counseling to belp with personal problems and adjusting to new situations; assistance in obtaining other necessary supportive services: determining, through periodic reviews, the continued appropriateness of and need for placement: and recruitment and licensing of foster care homes and facilities...

11. Foster Care Services for Children

Foster care services for children are those services or activities associated with the provision of an alternative family life experience for abused, neglected or dependent children, between birth and the age of majority, on the basis of a court commitment or a voluntary placement egreement signed by the carent or guardian. Services may be provided to children in fester family homes, fester nomes of relatives, group nomes, emergency shelters. residential facilities, could care institutions. pre-adoptive homes or supervised independent tiving situation. Component services or activities may include assessment of the child's needs; case planning and case management to assure that the child receives proper care in the placement: medical care as an integral but subordinate part of the service: counseting of the child, the child's parents, and the foster parents; referral and assistance in optaining other necessary supportive services: periodical reviews to determine the continued appropriateness and need for piacement; and recruiment and licensing of foster nomes and child care institutions.

12. Health Related and Home Health Services

Health related and home health services are those in-home or out-of-home services or activities designed to assist individuals and families to attain and maintain a favorable condition of health. Component services a activities may include providing an analysis or assessment of an individual's health problems and the development of a treatment plan; assisting individuals to identify and understand their health needs: assisting individuals to locate, provide or secure, and utilize appropriate medical treatment. preventive medical care, and health maintenance services, including in-home health services and emergency medical services: and providing follow-up services as needed.

13. Home Based Services

Home based services are those in-home services or activities provided to individuals or families to assist with household or personal care activities that improve or meintain adequate family well-being. These services may be provided for reasons of illness, incapacity, frailty, absence of a caretaker relative, or to prevent abuse and neglect of a child or adult. Major service components include homemaker services chore services, home maintenance services, and household management services. Component services or activities may include protective supervision of adults and/or children to help prevent abuse, temporary non-medical personal care, house-cl aning. essential shopping, simple household repairs, yard maintenance; teaching of homemsking skills, training in self-halp a self-care skills, assistance with meal plant and preparation, sanitation, budgeting, and general household management.

14. Home Delivered Meals

Home-delivered meals are those services or activities designed to prepare and deliver one or more meals a day to an individual's residence in order to prevent institutionalization, mainutrition, and feelings of isolation. Component services or activities may include the cost of personnel, equipment, and food; assessment of nutritional and dictary needs; nutritional education and counseling; socialization services; and information and referral.

15. Housing Services •

riousing services are those services or activities designed to assist individuals or families in locating, covaining, or retaining suitable housing. Component services or activities may include tenent counseling; helping individuals and families to identify and correct substandard housing conditions on behalf of individuals and families who are make to protect their own interests; and assisting individuals and families to understand leases, secure utilities, make moving arrangements and minor repovations.

15. Independent and Transitional Living Services

Independent and transitional living services are those services and activities designed to help older youth in foster can homeless youth make the transition to



independent living, or to help adults make the transition from an institution, or from homelessness, to independent living. Component services or activities may include educational and employment assistance. training in daily living skills, and housing assistance. Specific component services and activities may include supervised practice living and post-foster care services.

17. Information and Referral Services

Information and referral services are those services or activities designed to provide information about services provided by public and private service providers and a brief assessment of client needs (but not diagnosis and evaluation) to facilitate appropriate rejerral to these community resources.

18. Legal Services

Legal services are those services or activities provided by a lawyer or other person(s) under the supervision of a lawyer to assist individuals in seeking or obtaining legal help in civil matters such as housing. divorce, child support, guardianship. paternity, and legal separation. Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.

19. Pregnancy and Parenting Services for Young Parents

Pregnancy and parenting services are those services or activities for married or unmarried adolescent parents and their families designed to assist young parents in coping with the social, emotional, and economic problems related to pregnancy and in planning for the future. Component services or activities may include securing necessary neaith care and living arrangements: obtaining legal services: and providing counseling, child care education. and training in and development of parenting

20 Prevenuon and Intervention Services

Prevention and intervention services are those services or activities designed to provide early identification and/or timely intervention to support families and prevent or ameliorate the consequences of, abuse. neglect, or family violence, or to assist in making arrangement for alternate piacements or living arrangements where necessary. Such services may also be provided to prevent the removal of a child or adult from the home. Component services and activities may include investigation; assessment and/or evaluation of the extent of the problem: counseling, including mental health counseling or therapy as needed: developmental and parenting skills training: respite care; and other services including supervision, case management, and transportation.

21. Protective Services for Adults

Protective services for adults are those services or activities designed to prevent or remedy abuse, neglect or exploitation of adults who are unable to protect their own interests. Examples of situations that may require protective services are injury due to

mairreatment or family violence: lack of adequate food, clothing or shelter, lack of essential medical treatment or renabilitation services: and lack of necessary financial or other resources. Component services or activities may include investigation: immediate intervention; emergency medical services: emergency shelter: developing case plans; initiation of legal action (if needed): counseling for the individual and the family; assessment/evaluation of family circumstances: arranging alternative or improved living arrangements: preparing for foster placement, if needed: and case management and referral to service providers.

22. Protective Services for Children

Protective services for children are those services or activities designed to prevent or remedy abuse, neglect, or exploitation of children who may be harmed through physical or mental injury, sexual abuse or exploitation, and negligent treatment or maltreaument, including failure to be provided with adequate food, clothing, shelter, or medical care. Component services or activities may include immediate investigation and intervention: emergency medical services: emergency shelter; developing case plans, initiation of legal action (if needed); counseling for the child and the family, assessment/evaluation of family circumstances: arranging alternative living arrangement; preparing for foster placement, if needed; and case management and referral to service providers.

23. Recreational Services

Recreational services are those services or activities designed to provide, or assist individuals to take advantage of, individual or group activities directed towards promoting physical, cultural, and/or social development

24. Residential Treatment Services

Residential treatment services provide short-term residential care and comprehensive treatment and services for children or adults whose problems are so severe or are such that they cannot be cared for at home or in foster care and need the specialized services provided by specialized facilities. Component services and activities may include diagnosis and psychological evaluation; alcohol and drug detoxification services; individual, family, and group therapy and counseling; remedial education and GED preparation; vocational or prevocational training; training in activities of daily living; supervised recreational and social activities; case management; transportation: and referral to and utilization of other services.

25. Special Services for Persons With Developmental or Physical Disabilities, or Persons With Visual or Auditory lanpairments

Special services for persons with developmental or physical disabilities, or persons with visual or auditory impairments. are services or activities to maximize the potential of persons with disabilities, belp alleviate the effects of physical, mental or emotional disabilities, and to enable these

persons to live in the least restrictive environment possible. Component services of activities may include personal and family counseling; respite care; family support; recreation; transportation; aid to assist with independent functioning in the community; and training in mobility. communication skills, the use of special aids and appliances, and self-sufficiency skills. Residential and medical services may be included only as an integral, but subordinate, part of the services.

26. Special Services for Youth Involved in or at Risk of Involvement With Criminal Activity

Special services for youth involved in or at risk of involvement with criminal activity are those services or activities for youth who are, or who may become, involved with the juvenile justice system and their families. Components services or activities are designed to enhance family functioning and/ or modify the youth's behavior with the goal of developing socially appropriate behavior and may include counseling, intervention therapy, and residential and medical services if included as an integral but subordinate part of the service.

27. Substance Abuse Services

Substance abuse services are those services or activities that are primarily designed to deter, reduce, or eliminate substance abuse or chemical dependence. Except for initial . detorification services, medical and residential services may be included but only as an integral but subordinate part of the service. Component substance abuse services or activities may include a comprehensive range of personal and family counseling methods, methodone treatment for opiate abusers, or detextification treatment for alcohol abusers. Services may be provided in alternative living arrangements such as institutional settings and community-based halfway houses.

28. Transportation Services

Transportation services are those services or activities that provide or errange for the travel, including travel costs, of individuals in order to access services, or obtain medical care or employment. Component services or activities may include special travel arrangements such as special modes of transportation and personnel to accompany or assist individuals or families to utilize transportation.

29. Other Services

Other Services are services that do not fall within the definitions of the preceding 26 services. The definition used by the State for each of these services should appear elsewhere in the annual report.

Appendix B to Part 96-SSBG Reporting Form and Instructions

Instructions

This form must be used by states as the reporting instrument to satisfy the requirements of 45 CFR 96.74(a) (1) through (4). Following are instructions on how to complete the form:

1. Enter the name of the state submitting the form.

- 2. Enter the fiscal year for which the form is being submitted. Either the state or federal fiscal year may be used.
-). Enter the month and year of the beginning and end of the fiscal year—e.g., 07/91 to 06/92.

Services

4. The "service" column contains a list of services that are to be used for national reporting. This list in no way mandates how 3 state is to design its program of services under the SSBG, but rather is to be used only to obtain nationally comparable statistics. If the services that your state provides reasonably fit the uniform service definitions in appendix A, use them, in cases where no lit is possible between the state services and the services on the form, use item number 29—the other services category. Please list all services reported under item 29, using a separate sheet if necessary. The state's definition of these services must appear in the state's annual report.

Recipient Data

In reporting the following data:

- Each state should use its own definitions
 of the terms "adult" and "child." These
 definitions should be described eisewhere in
 the annual report. If the definitions of adult
 and child vary by services, all such
 definitions must be included.
- · States should, if possible, consider as the "recipient" of the service the individual to whom the service is provided. This means that the child would be considered the recipient of child day care services, even if such services are provided to allow the child's adult caretaker to pursue employment, Similarly, an adult who receives counseling services should be considered as the recipient of that service. even if the service is provided as part of a child's protective services plan. In cases where each member of a family, for example, receives an individual service such as counseling, each family member should be considered as a separate recipient.
- States should, if possible, consider as a service, i.e., a count of one, any service provided to a single recipient for the duration of the reporting period (one year), or any fraction thereof. In cases where an individual received a service during the reporting period, then discontinued the service, and then received the service again, the individual should only be counted once; if possible.
- The criteria applied in determining eligibility for each service—such as income eligibility guidelines, sliding fee scales, the effect of public assistance benefits, and any

- requirements for enrollment in school or training programs—should be described elsewhere in the annual report.
- Under "Number of Recipients—Adults" enter the number of adults who have received each service funded in whole or part under the SSBG.
- 6. Under "Number of Recipients— Children" enter the number of children who have received each service funded in whole or part under the SSBG.
- 7. Under "Number of Recipients—Total" enter the total number of recipients of each sorvice. This should be the sum of the adults and children reported in the preceding "adult" and "children" columns.

Expenditure Data

- 8. Under "Expenditures—Total \$" enter all funds that the state expends on each service. This should include SSBG funds as well as funds from other federal sources, state funds, and local funds. A listing of the sources of these funds, and the amounts allocated, should appear elsewhere in the annual report.
- 9. Under "Expenditures—SSBG 5" enter the total SSBG funds expended for each service. This column should be totaled, and the sum placed at the bottom of the column in the "Totals" box:
- 10. Under "Expenditures—Per Adult" enter the average amount of SSBG funds expended on each adult recipient of each service.
- Under "Expenditures—Per Child" enter the average amount of SSSG funds expended on each child recipient of each service.
- 12. Item 30 in the "Total SSBG S" column should contain other expenditures and income as follows:
- a. "Transfers in" should contain funds transferred from other federal block grants to the SSBG program. A listing of the source(s) of block grant funds and their amounts should appear elsewhere in the annual
- b. "Transfers Out" should show funds transferred from the SSBG program to other federal block grants. A listing of the program(s) to which SSBG funds were transferred, and the amounts, should appear elsewhere in the annual report.
- c. "Carry Forward" should show funds the state intends to carry over from the reporting fiscal year to the following fiscal year. The SSBC statute permits states two years to expend SSBG funds.
- d. "Carry Over" should show funds carried from a previous fiscal year into the current reporting year.
- e. "Administrative Costs" should show all other non-service use of SSBG funds—e.g.,

- funds expended for training, licensing activities, or overhead costs.
- f. This column should be totated, and the sum placed at the bottom of the column in the "Totals" box.
- 13. Under "Provisions Method—Public!
 Private" enter a check mark on "X" in the appropriate column(s) to indicate whether a service was provided by public agencies or private agencies. In some cases, a given service may have been provided by both methods, in which case both columns would be checked for that service.
- 14. Enter the name, title, and telephone number of a contact person who can answer questions about the data.

15. Code Column:

Six of the columns on this form have a "C" column to the right of them. These are "Code" columns to permit a state to indicate, for expenditure data, whether each call of data is A (acrual). E (estimated), or S (sampled), and for recipient data, whether the data is based on an unduplicated (U) or duplicated (D) count of recipients. These codes will permit the Department to determine the relative degree of statistical validity of the data. Actual recipient counts and expenditure amounts must be used when available. If actual counts are not available. sampling and/or estimating may be used to derive the numbers in this report. A description of the sampling and/or estimation methods used to derive any data must appear elsewhere in the annual report.

Report Submission Using PC Diskettes

States with personal computer (PC) equipment may submit this data using PC diskettes in addition to the hardcopy form which will be included in the complete annual report. Diskettes may be either \$ 1/4" or 31/2": data may be submitted using Letus 1-2-3. Quattro Pro, DBase III or IV, Wordstar. Word Perfect, or ASCII formats. Use of Lotus 1-2-3 is preferred, but any of the other formats listed may be used. If a state wishes to use a format other than one listed here. please cali Bryant Tudor on (202) 401-5535 or Frank Burns on (202) 401-5536, or write to the Office of Community Services. Administration for Children and Families. Fourth Floor-East Wing, 370 L'Enfant Promenade, SW., Washington, DC 10447, Use of diskettes can greatly reduce transcription errors and also facilitate processing of the data once received. We anticipate that many states will want to avail themselves of this method of reporting.

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